

BEST AVAILABLE COPY

Dec 8, 2004

PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2004

Application or Docket Number

10/673170

CLAIMS AS FILED - PART I

	(Column 1)	(Column 2)
TOTAL CLAIMS		
FOR:	NUMBER FILED	NUMBER EXTRA
TOTAL CHARGEABLE CLAIMS	<i>minus 20 =</i>	
INDEPENDENT CLAIMS	<i>minus 3 =</i>	
MULTIPLE DEPENDENT CLAIM PRESENT <input type="checkbox"/>		

* If the difference in column 1 is less than zero, enter "0" in column 2

CLAIMS AS AMENDED - PART II

	(Column 1)		(Column 2)	(Column 3)
AMENDMENT A	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
Total	<i>20</i>	Minus	<i>20</i>	<i>0</i>
Independent	<i>2</i>	Minus	<i>3</i>	<i>0</i>
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM <input type="checkbox"/>				

8/15

	(Column 1)		(Column 2)	(Column 3)
AMENDMENT B	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
Total	<i>19</i>	Minus	<i>20</i>	<i>0</i>
Independent	<i>2</i>	Minus	<i>3</i>	<i>0</i>
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM <input checked="" type="checkbox"/>				

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	(Column 1)		(Column 2)	(Column 3)
AMENDMENT C	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
Total	<i>18</i>	Minus	<i>20</i>	<i>0</i>
Independent	<i>2</i>	Minus	<i>3</i>	<i>0</i>
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM <input type="checkbox"/>				

SMALL ENTITY TYPE ☐ OR OTHER THAN SMALL ENTITY

RATE	FEE		RATE	FEE
BASIC FEE	395.00	OR	BASIC FEE	750.00
<i>x 25</i>		OR	<i>x 50</i>	
<i>x 100</i>		OR	<i>x 200</i>	
<i>+ 180</i>		OR	<i>+ 360</i>	
TOTAL		OR	TOTAL	

RATE	ADDITIONAL FEE		RATE	ADDITIONAL FEE
<i>x 25</i>		OR	<i>x 50</i>	
<i>x 100</i>		OR	<i>x 200</i>	
<i>+ 180</i>		OR	<i>+ 360</i>	
TOTAL ADDIT. FEE		OR	TOTAL ADDIT. FEE	

RATE	ADDITIONAL FEE		RATE	ADDITIONAL FEE
<i>x 25</i>		OR	<i>x 50</i>	
<i>x 100</i>		OR	<i>x 200</i>	
<i>+ 180</i>		OR	<i>+ 360</i>	
TOTAL ADDIT. FEE		OR	TOTAL ADDIT. FEE	

* If the entry in column 1 is less than the entry in column 2, enter "0" in column 3.

* If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20".

* If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3".

The "Highest Number Previously Paid For" (Total or Independent) is the highest amount found in the appropriate box in column 1.